Iowa Health

FOCUS

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From the director

-Dr. Stephen Gleason

Buying health-care coverage is a challenge for most consumers.

To help with this task, the Iowa Department of Public Health has collaborated with the Iowa Insurance Division to publish Comparing Your Options, A Look at HMOs and ODSs in Iowa. (See Page 4)

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Iowa Rx Cooperative to save seniors money

By Dr. Carol Kuhle Mercy Mayo Family Practice Residency

owa's senior citizens face tough choices when it comes to purchasing their prescription drugs. Many patients feel burdened by the high cost of prescription drugs. Some are forced to do without other things in order to buy them. And, many are doing without their needed medications due to lack of funds or insurance-prescription coverage.

However, Iowa's seniors will soon be helped by a developing prescription discount program, called the Iowa RX Cooperative. It will be a buying club and/or a cooperative, not an insurance or subsidy program.

Governor Vilsack recruited a work group of pharmacists, doctors, nurses and senior citizens to develop and recommend the project. The goal is to have it operating in the spring of 2001.

The work group studied other senior drug programs enacted recently in 16 states. It then investigated the mechanisms currently controlling the pharmaceutical marketplace. It recommended hiring a marketing research group from the University of Northern Iowa to measure Iowa senior citizens' needs and attitudes on purchasing prescription medications.

Senator Tom Harkin (D-IA) obtained \$1million to cover start-up costs for the project. These funds will pay for administering and operating the coop until enough seniors have enrolled for it to become self-sufficient. To help the work group obtain further advice and counsel, Senator Harkin and his staff connected the group with nationally recognized experts.

To reach the goal of reducing high prescription drug costs for lowa senior citizens, the work-group adopted the following guidelines. The project:

- will become self-sufficient and not require on-going funding from the state or federal government;
- will not shift the burden of high drug costs from seniors to pharmacists;
- will be a public-private partnership.

This project may serve as a model for other states.

Though much work remains, preliminary plans for the Iowa Rx Cooperative have been developed. Cooperative members will pay an annual fee of \$20 to \$50 a year. They will be given a membership discount card to present at their own pharmacies when purchasing prescriptions. Members will then be able to buy prescription drugs at a lower cost but will be responsible for paying the entire discounted price.

Most prescription drugs dispensed by pharmacists will be eligible for the lower prices. Discounts will vary from one medication to another. It is too early to estimate the amount of the discounts. All pharmacies in the state will have the opportunity to participate. Members of the cooperative -along with their physicians and
pharmacists -- will decide what
medications are best for them.
To maximize savings, senior
citizens will need to choose the
medications that are right for
them. Seniors should let their
doctors know that they want
the most cost-efficient
medication that is effective and
safe. Often there is an

alternative drug that will



Dr. Carol Kuhle visits with Rev. William Cotton about the Iowa RX Cooperative.

substantially reduce treatment costs. The greatest savings will occur when senior patients, along with their doctors and pharmacists, work as a team to find effective, safe and cost-efficient treatment. The lowa Rx Cooperative will be such a cooperative effort.

Groups or agencies that interact with or serve seniors are in a good position to help deliver the message about the proposed coop. Those groups with newsletters should consider placing an article similar to this one in the next issue. For more information, call 515-281-4343.

Dr. Kuhle is a Senior Medical Advisor for Elder Affairs with the Iowa Department of Public Health and is RX Coop Chair.

From the director

(From the director Page 1)

Buying health-care coverage is a challenge for most consumers. You can't kick the tires or take it for a test drive; and there's definitely no money-back guarantee.

To help consumers with this task, the Iowa Department of Public Health has collaborated with the Iowa Insurance Division to publish Comparing Your Options, A Look at HMOs and ODSs in Iowa.

Illustrated by Iowa children, the 25-page booklet is a colorful and helpful report on five health plans and one organized delivery system (ODS). An ODS is a plan in which health-care providers deliver a comprehensive package of health-care services to enrollees for a per-person fee.

Among the HMOs are Coventry Health Care of Iowa, Exclusive Healthcare, John Deere Health Plan, Medical Associates Health Plan, and Wellmark Health Plan of Iowa. Keokuk Area Hospital is the sole organized delivery system.

The pamphlet tells readers how to use the publication, provides plan membership numbers and explains insurance terms. It lists the percentage of plan providers who are board-certified. The pamphlet also presents the utilization rates of various medical services such as prescription drugs, antidepressants, diabetic eye exams, ambulatory care, and services for mental health and chemical dependency.

It also gives utilization numbers for breast cancer screening, prenatal, maternity and well-child care; and the extent to which members are advised to quit smoking. The pamphlet tells consumers how to file complaints and appeals.

The lowa Legislature mandated collection and distribution of these data to help consumers with the often confusing and frustrating task of choosing a health plan. With *Comparing your options: A look at HMOs and ODSs in lowa,* you still may not be able to kick the tires, but it's a good start to publication of a health-consumer report card.

The publication is available on the department's web site at www.idph.state.ia.us. You may get a hard copy by writing Deb Weiser, Iowa Department of Public Health, Lucas State Office Building, 321 E. 12th St., Des Moines, IA 50319-5787.

The holidays and the end of a good year

This is my last opportunity before the holidays to wish you all a blessed Yuletide and happy new year. This past year has brought some important victories for public health and I thank you all for helping to make them happen.

Most of you who read this column, by the way, are collaborators in our mission of promoting and protecting the health of lowans. We depend on you...and lowans depend on all of us. I value your collaboration and friendship.

Obtaining Past Issues

Back issues of *Iowa Health FOCUS* are available on the Iowa Department of Public Health Web site at: www.idph.state.ia.us.

Flu vaccine delays require priorities for distribution

By Cort Lohff, MD, MPH Assistant State Epidemiologist

lu shots are the primary way to prevent influenza illness and secondary complications. In healthy persons younger than 65 years of age, it can prevent approximately 70 to 90 percent of illness. In the elderly or those with chronic health conditions, the vaccine, though somewhat less effective in preventing illness, will significantly reduce the likelihood of severe influenza illness, severe complications (such as pneumonia), hospitalization, and death.

Flu shots need to be given prior to the start of each year's influenza season. However, difficulties in manufacturing this year's vaccine have resulted in a significant delay in the distribution of the vaccine. Many clinics, hospitals, health departments, and other locations have not yet received vaccine or have received only a partial shipment.

Because of these delays, we are urging that available vaccine be given to high-risk people first. Those considered at high risk are:

- Persons over age 65;
- Residents of any age of nursing homes or other chronic care facilities who have chronic medical conditions;
- Adults and children aged 6 months and older who have heart or lung disease, including asthma, or other chronic medical conditions that put them at higher risk for infections;
- Children and teenagers, aged 6 months to 18 years, who are receiving long-term aspirin therapy;
- Women who will be in the second or third trimester of pregnancy during the influenza season.

In addition, health care providers who give direct patient care should receive the vaccine.

Because there are still persons in these high-risk groups who have not yet received their vaccination, we are urging health care providers to use their available vaccine to vaccinate these people first. If providers have vaccine remaining, we recommend it be redistributed to others in need. Providers can contact their local health departments, hospitals, or area clinics, or call the lowa Department of Public Health Bureau of Immunization at 1-800-831-6293 for information on how to re-distribute their vaccine.

For providers who need vaccine, the Centers for Disease Control and Prevention has contracted with Aventis-Pasteur for the production of 9 million doses of vaccine. Additional information about the application process and vaccine availability is available through Aventis-Pasteur at 1-800-720-8972. Delivery of this vaccine is expected in mid-December.

As more vaccine becomes available, and after those in high-risk groups have been vaccinated, it will be appropriate to begin to vaccinate others. Vaccines can be given at any time during the flu season. Fortunately, there has only been one confirmed case of influenza in Iowa and none in neighboring states. This probably means that influenza will not peak in Iowa until mid-to-late January. By then, most people who intend to receive the vaccine will probably have done so.

For more information, call 1-800-362-2736.

Diabetes and the flu

Persons with diabetes are:

- about three times more likely to die with complications of influenza and pneumonia than people without diabetes
- six times more likely to be hospitalized with influenza during flu epidemics.

And yet,

- Only a third of people with diabetes have ever been vaccinated for pneumonia shot.
- Only one half of adults with diabetes report getting immunized against influenza.
- According to lowa hospital discharge data, the average cost of hospitalization when there was a diagnosis of both diabetes and influenza in 1998 was \$6,256.

If you have diabetes, get immunized against influenza and pneumococcal pneumonia!

Diabetes Control Program Iowa Dept. of Public Health

JEL Tour reaches 1,000 lowa youth

By Tammi Blackstone
IDPH Division of Tobacco Use Prevention and Control

owa's youth anti-tobacco movement -- JEL (Just Eliminate Lies) -- recently took its message on the road. From Nov. 9 to 14, the JEL Tour 2000 visited five cities across the state, reaching over 1,000 lowa youth.

Founders of the JEL movement determined earlier that it was crucial to reach students in all areas of the state. JEL tour events passed through Council Bluffs, Sioux City, Des Moines, Waterloo, and Davenport.

lowa teens are taking a stand against "big tobacco," and they don't want to be targeted anymore. This message came from two lowa high school students who traveled on the tour as emcees for all events. John Tietsort, a junior at Battle Creek-Ida Grove High School, and Libby Pederson, a senior at Des Moines Roosevelt, were the leaders of the JEL tour. They talked to other students about the JEL movement, the manipulative tactics of "big tobacco," and how they can get involved with JEL.

The JEL Tour 2000 was designed to be a fun and casual event. All tour stops were set up with inflatable carnival rides, a video dance screen, and an artist airbrushing tattoos. Free food and JEL merchandise were provided to students who signed up to become part of the movement.

Special guests included two celebrities from cable's Music Television (MTV) Road Rules cast. Duffy and Dan Setzler traveled with the JEL tour and talked with Iowa students about their views on "big tobacco." Duffy Setzler has been very involved with the national "truth" campaign and was eager to help Iowa start a similar movement.

Each tour event ended with a concert by pop star Kristine W. She performed hits from her new album, "Stronger." Students won backstage passes to meet Kristine W and her dancers by answering questions about JEL and "big tobacco."

The tour group returned to Des Moines exhausted but excited about the future of JEL. Current projects include communicating with new JEL members, connecting all members with community resources, and implementing a tobacco counter-marketing campaign.

Council urges widespread defibrillator use

By Martha Perry IDPH FOCUS Copy Editor

t's Saturday, and you and your mother are at Valley West Mall in West Des Moines. Suddenly, your mother acts distressed, clutches her chest area, and falls to the ground. Soon she's unconscious, shows no signs of blood circulation, no breathing, no coughing. She's having a cardiac arrest—when the heart stops or doesn't function efficiently –and she's in a race with time for her life.

You call out for help and immediately begin CPR. Soon, mall security arrives with a machine about the size of a laptop computer and takes over -- giving your mother a life-saving electrical shock to the heart. Thanks to public access to a machine, your mother won't be among the 350,000 Americans who annually die from sudden cardiac arrest.

What is this machine, and what if it hadn't arrived quickly? The device is an automated external defibrillator (AED), costing about the same as a laptop computer. Just about any adult can be taught to use one. With voice prompts throughout the procedure, a pictogram on the AED first shows where to place the electrodes. Then the area around the victim is cleared, and a shock button is pushed.

Untreated, cardiac arrest can result in death within 10 minutes. Chances of survival drop nearly 10 percent with each passing minute from collapse to defibrillation. Often emergency crews take much longer than that to respond to a call for assistance.

AEDs are now more available to the public due to recent changes in lowa Department of Public Health rules on emergency medical services providers. Also important to AED use and acceptance was

approval of the rule amendments by the state's Council of Scientific and Health Advisors in September. It also recommended widespread use of automated external defibrillators

The council, organized by the Iowa Department of Public Health (IDPH) in December of 1999, is composed of Iowa scientific and health personnel who study health-related issues of concern to Iowans. It is co-chaired by IDPH Director Dr. Stephen Gleason and Dr. Sheila Riggs, senior epidemiologist at Wellmark Blue Cross and Blue Shield and director of the Wellmark Foundation. The council recommendation means these life-saving machines will be more available in public places throughout the state. The council also recommended annual skill practice by trained lay people, along with outcome reporting on automated external defibrillator use.

Previously, AEDs were usually limited to use by emergency medical service personnel, such

Untreated, cardiac arrest can result in death within 10 minutes. Chances of survival drop nearly 10 percent with each passing minute from collapse to defibrillation.

as emergency medical technicians, first responders, and those in law enforcement. Now, anyone who has completed a current adult CPR course, attained approved training on AEDs, and registered with the department is allowed access to the device. Approved AED training programs include courses by the department's emergency medical services bureau – available at all community colleges. Also accepted are training programs sponsored nationally by the American Heart Association, National Safety Council and the American Red Cross.

, "Use of AEDs is a wonderful opportunity to expand the emergency medical services program and help save more lives," says Gary Ireland, chief of the department's Bureau of Emergency Medical Services. "People in the Lucas Building also will be safer with two AEDs to be located there for use by properly trained employees."

Ireland says 59 public access defibrillators are now registered. Thirty are private businesses, such as fitness centers, shopping malls and a few schools; and 24 are law-enforcement related.

An officer used an AED machine earlier this year to revive Kayne Robinson, chairman of the Iowa Republican Party, who was visiting the Iowa Capitol. People who use the machines to try to help others in medical emergencies are protected from liability by the state's Good Samaritan Law. It covers use of AEDs by properly trained and registered persons.

As in many growing suburbs, new buildings iln West Des Moines, are being located more than five to 10 minutes away from the home base of traditional emergency medical services (EMS). EMS and law enforcement personnel from West Des Moines are encouraging those in areas not accessible within several minutes by EMS units to have AEDs in their buildings. This includes private organizations like the lowa Farm Bureau. There are now 19 public access defibrillators in West Des Moines establishments, including Valley High School.

Anita Bailey, paramedic and Northwest regional coordinator for the Bureau of Emergency Medical Services, provides training to interested employees in the Lucas Building. She is on the American Heart Association Emergency Cardiovascular Care Committee. Bailey says the American Heart Association's international guidelines recommend placement of a public access defibrillator if emergency medical services (ambulances) cannot routinely reach a site within five minutes and there is a reasonable probability there will be at least one sudden cardiac arrest there every five years.

"All of us in the Bureau of Emergency Medical Services are thrilled with the opportunity for training lay people to use automated external defibrillators," says Bailey. "We know that even the best prepared emergency medical services unit has little chance of arriving at all locations in their territory within the first five minutes of every cardiac arrest incident. If a trained person can defibrillate while EMS is enroute to the scene, we have a tremendous opportunity to improve survival rates from sudden cardiac death in lowa."

IDPH receives national awards

By Kevin Teale IDPH Communications Director

wo lowa Department of Public Health publications were recently singled out as some of the best work in the country. The awards were handed out at the meeting of the National Public Health Information Coalition (NPHIC) in Denver last month.

Early ACCESS received a gold award for a growth and development wheel, produced by Dawn Gentsch and Mike McClain of the Early Intervention Program in the Family Services Bureau. Judges said the wheel was "informative and easy to use." They also liked the fact it was printed in English and Spanish.

The Bureau of External Affairs received a bronze award for a news release on teen smoking rates in the state.

NPHIC is the national professional association linking communication offices of state and territorial health departments.

New grant creates healing environments

he National Endowment for the Arts has designated a \$50,000 Leadership Initiative Grant to establish professional arts programs inside health-care institutions. The grant was awarded to the Society for the Arts in Healthcare, a national service organization founded in 1990 to encourage the incorporation of the arts into health-care environments of all kinds, from hospitals and hospices to nursing homes and public health programs.

The society's 550 members include art administrators, artists, therapists, doctors, nurses, medical students, designers, architects,

and patrons, mostly in the United States but some in Canada, Great Britain, Europe, and Japan.

Health-care organizations throughout the country are invited to apply for funding for an on-site visit by one of the society's specialists. The specialist will provide guidance in developing a plan, tailored to the organization's resources, to include a wide variety of arts in the institution's programming.

For example, the plan might enlist community artists to transform patients' medical experiences through hands-on art, music, or writing. A public health agency could employ an actor to help develop an HIV education program by involving teenagers in role-playing.

For more information and grant guidelines, visit The Society for the Arts in Healthcare at www.societyartshealthcare.org (under the Education page), or contact Suzy Brenner, Telephone: 202-244-8088; Email: healart@teleport.com

Epidemiology notes

By Patricia Quinlisk, MD State Epidemiologist

From the Center for Acute Disease Epidemiology, Iowa Department of Public Health

The first case of influenza has been confirmed in Iowa. A positive culture of Influenza A from a Johnson County child has been reported (sub-type being determined). We have reason to believe that this child picked up the flu during out-of-state travel for the Thanksgiving holidays. With the start of the flu season in early December, influenza would

be expected to peak in mid-January.

Please help us to remind people to wash their hands, stay home if ill, cover their noses and mouths when coughing or sneezing. Practitioners should use available vaccine for high-risk persons until more vaccine becomes available.

- The Children's Habilitation Center in Johnston has passed two complete incubation periods (28 days) without a new case of adenovirus infection among residents or staff. The outbreak is over! As of last Wednesday, the center began to resume normal activities. The children will be returning to school starting this week.
- ■☐The Nov. 17th edition of the MMWR has a notice indicating that there is a "temporary shortage" of adult tetanus and diphtheria toxoids (Td). Vaccine supplies are expected to be restored early in 2001. According to our Immunization Program, the shortage is not affecting publically-funded clinics here in Iowa. Private providers may experience a shortage, and are asked to call the manufacturer directly if this were to occur. For more information, see CDC's web site at www.cdc.gov.
- The Iowa Department of Public Health is working closely with the Division of Emergency Management to facilitate the

distribution and completion of the Justice Department's Survey to determine preparedness for terrorist events. This survey needs to be completed by each county by first responders, emergency management and public health. Public health departments must complete a section of this survey.

Its completion is important to assess public health's capability at the local level because future funding for things like public health communication equipment and decontamination showers for local ER's may be decided on the results. Information and the survey has been sent to each local health department. For more information, contact IDPH or the community health consultant in your region.

Classifieds

U of I MPH informational session - The University of Iowa College of Public Health will hold an information session about its Master of Public Health (MPH) and graduate certificate programs on Dec. 7, 5:30-7:00 p.m. The session will be held at the following IC N sites:

Cedar Falls
University of Northern Iowa
Center for Educational Technology
2304 College

Cedar Rapids Grant Wood AEA Revere Room 4401 6th St. SW

Des Moines Iowa Dept. of Public Health Lucas State Office Building ICN Room, 6th floor Council Bluffs lowa School for the Deaf Careers Building, 2nd floor 1600 S. Highway 275

Davenport Public library Meeting Room A 321 Main

Starting in spring 2001, course work will be offered via ICN and the World Wide Web. This information session, conducted by Associate Dean Jack Barnette, will cover program overview, course schedule, admission, and related support services. This event is sponsored in cooperation with the UI division for Continuing Education/Center for Continuing Education.

We've moved - The Bureaus of Radiological Health and EMS have moved out of the Lucas Building. They are now located at 401 SW 7th Street in Des Moines. The new phone numbers for these bureaus are 515-281-3478 for Radiological Health and 515-725-0326 for EMS.

Focus Editor: Kara Berg

What would you like to see in *lowa Health Focus*? Send your suggestions for future articles, letters to the editor, and upcoming events or to add names to the mailing list by e-mailing us at kberg@idph.state.ia.us